U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.

Fo	r Official Use Only
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1. File Number U - 8847

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

3. Name	e and address of person filir	ıg.	4. N	4. Name, file number, and address of labor organization.						
Name	Peter	J Grillo	N	ame I.U.P.A.T.	District Cou	ncil No. 9	AFL-CIO			
			L	abor Organization File I	Number 006-77	0				
P.O. B	ox, Bldg., Room No., if any		P	O. Box, Building and R	toom Number, if any	A ************************************	e and a service of the disconnection of 17th an arterior of the			
Street	155 West Plum St	reet	S	treet 45 West 14t	h Street	**************************************	2947000070			
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State	New York	ZIP Code + 4	11717 s	tate New York		ZIP Code + 4	10011-7419			
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Name Name Trade I	e and address of Employer (i	rer whose employees including trade name, if an	y). 7.a	Presents or is active Nature of Interest, Trai	ly seeking to repre- nsaction, or Income.					
Name Name Trade I P.O. B Street City State	e and address of Employer (i	ZIP Code + 4	y). 7.a No. No. Signature , under penalty of Perjuin any accompanying do	Presents or is active Nature of Interest, Training Nature of Interest, Tra	penalties of the law,	\$0				
Name Name Trade I P.O. B Street City State	e and address of Employer (in land) Name, if any: ox, Bldg., Room No., if any ignature and verification. itted in this report (including signed's knowledge and belefice and possible of the land)	ZIP Code + 4	y). 7.a 7.b Signature , under penalty of Perjui in any accompanying deplete. (See the section of	Presents or is active Nature of Interest, Training Nature of Interest, Tra	penalties of the law, amined by the signal uctions.)	\$0, that all of the interpretations are the state of the interpretation.	e best of the			

Name of Person Filing Peter Grillo	File Number U-
B. Held an interest in or derived income or economic benefit with monetary value substantial part of which consists of buying from, selling or leasing to, or other of an employer whose employees your labor organization represents or is active. (2) any part of which consists of buying from or selling or leasing directly or incidealing with your labor organization or with a trust in which your labor organization.	wise dealing with the business yely seeking to represent, or lirectly to, or otherwise
8. Name and address of Business (including trade name, if any).	9. Business deals with:
Name Koehler & Issacs LLP	
Trade Name, if any:	a. Labor Organization b. Trust
P.O. Box, Bldg., Room No., if any 29th Floor	c. Employer
Street 120 Broadway	
City New York	
State New York ZIP Code + 4 10271	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.
Name	Fees paid for legal services for calendar year 2004.
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	11.b. Approximate dollar value of such dealing. \$149,189
City	12.a. Nature of interest held or income received.
State ZIP Code + 4	Holiday party.
	12.b. Amount. \$60
C. Received from any employer (other than an employer covered under or from any labor relations consultant to an employer any payment of money	
 Name and address of Employer or Labor Relations Consultant (including trade name, if any). 	14.a. Nature of payment.
Name	
Trade Name, if any:	
P.O. Box, Bldg., Room No., if any	
Street	
City	
State ZIP Code + 4	
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment. \$0

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Name of Person Filing Peter Grillo	File Number U-

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Union Labor Life Insurance Company Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 451 Park Avenue South City New York State New York ZIP Code + 4 10016	a. Labor Organization b. Trust c. Employer	
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Union Labor Life Insurance Company Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 451 Park Avenue South City New York State New York ZIP Code + 4 10016	Amounts paid to insurance carrier insurance benefits for the calenda and the c	providing health ar year 2004.
To the second se	12.a. Nature of interest held or income received.	and with the comment of the comment
	Dinner meeting with insurance carr	ier.
	12.b. Amount,	\$30

Name of Person Filing Peter Grillo	File Number U-
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Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8. Name and address of Business (including trade name, if any).	9. Business deals with:	
Name Joint Apprentice and Training Fund	a. Labor Organization	
Trade Name, if any:	b. Trust	
P.O. Box, Bldg., Room No., if any	rannong	
Street 45 West 14th Street	c. Employer	
City New York		
State New York ZIP Code + 4 10011-7419		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	
Name Joint Apprentice and Training Fund Trade Name, if any: P.O. Box, Bldg., Room No., if any Street 45 West 14th Street City New York State New York ZIP Code + 4 10011-7419	Related organization. 11.b. Approximate dollar value of such dealing.	\$0
To an entire registration on the registration at an entire registration of the registr	12.a. Nature of interest held or income received.	and the second of the second s
	Attended graduation ceremony of apprenthe organization.	tices from
	12.b. Amount.	\$15

Name of Person I	Filing Pet	er Gril	lo	 			File N	Number U-		

Part B Continuation Page

B. Held an interest in or derived income or economic benefit with monetary value **from a business** (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

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Name and address of Business (including trade name, if any).						
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Trade Name, if any:	a. Labor Organization					
TIEGO TEGITO, II CITY.	b. Trust					
P.O. Box, Bldg., Room No., if any						
Street 45 West 14th Street	c. Employer	;				
City New York						
State New York ZIP Code + 4 10011-7419		ţ				
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.	v/ww/01**********************************				
Name Joint Apprentice and Training Fund	Related organization.	A ACCIONAMANA				
The commence of the the analysis and the state of the sta		Array constitution of the Party				
Trade Name, if any:		Volume V Action				
P.O. Box, Bldg., Room No., if any		***************************************				
Street 45 West 14th Street		Y V				
45 WESC 14111 SLEECL		v. St. A. V. S. V.				
City New York		// ***********************************				
State New York ZIP Code + 4 10011-7419	11.b. Approximate dollar value of such dealing.	\$0				
	12.a. Nature of interest held or income received.					
	Dinner following Glazier's Apprenticeship me	eting.				
		Ness & C. C. S.				
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		a STI system of				
	12.b. Amount.	\$67				